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PRADEMI		Application Number	10/717,110				
TRANSMITTAL		Filing Date	11/19/2003				
FORM		First Named Inventor	Richard L. Bontrager				
		Art Unit	3632				
(to be used for all correspondence after initial filing)		Examiner Name	Jonathon A. Szumny				
Total Number of Pages in This Submission	14	Attorney Docket Number	RSVP-03008US0				
ENCLOSURES (Check all that apply)							

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\ \ \ \	Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement			Petition Petition to Provisions Power of Change of Terminal Request f	o Convert to a all Application Attorney, Revocate Correspondence Disclaimer for Refund		1. R	of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): Return Postcard	
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Signature WII (AD)									
Printed	Printed name Michael L. Robbins								
Date 8/22/05					Reg. No.	54,774			
CERTIFICATE OF TRANSMISSION/MAILING									
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Mail Stop Amendment									
Signati	ure			1					

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8/22/05

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Michael L. Robbins

PTO/SB/17 (12-04) Approved for use through 07/31/2006, OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE fuction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number inder the Panerw Effective on 12/08/2004.

Consolidated Appropriations Act, 2005 (H.R. 4818). Complete if Known 10/717,110 **Application Number** TRANSMITTAL 11/19/2003 Filing Date For FY 2005 Richard L. Bontrager First Named Inventor **Examiner Name** Jonathon A. Szumny Applicant claims small entity status. See 37 CFR 1.27 Art Unit 3632 TOTAL AMOUNT OF PAYMENT (\$) 0.00RSVP-03008US0 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Credit Card Money Order None Other (please identify): ✓ Deposit Account Deposit Account Number: 06-1325 Deposit Account Name: 23910 - Fliesler Meyer LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES EXAMINATION FEES **FILING FEES SEARCH FEES Small Entity** Small Entity Small Entity Fee (\$) Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) 200 300 100 Utility 150 500 250 130 Design 200 100 100 50 65 Plant 200 300 160 80 100 150 600 300 Reissue 300 150 500 250 O n Provisional 200 100 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) **Fee Description** Fee (\$) Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 25 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 180 Multiple dependent claims **Total Claims** Extra Claims Fee Paid (\$) **Multiple Dependent Claims** Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20 Indep. Claims Extra Claims Fee Paid (\$) 4 - 3 or HP = ___0__x HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). **Total Sheets Extra Sheets** Number of each additional 50 or fraction thereof Fee Paid (\$) _ - 100 = (round up to a whole number) x Fees Paid (\$) 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)

SUBMITTED BY			
Signature	MU 160	Registration No. (Attorney/Agent) 54,774	Telephone 415.362.3800
Name (Print/Type)	Michael L. Robbins		Date 8/22/05

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